

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>RL</i>	75331	
O.I.P.E. CLASSIFIER		49	11/1/99
FORMALITY REVIEW		71471	11/8

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	11/1/99
2	11/1/99
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy